

110TH CONGRESS
1ST SESSION

H. R. 3130

To amend title V of the Public Health Service Act to provide for enhanced comprehensive methamphetamine treatment services.

IN THE HOUSE OF REPRESENTATIVES

JULY 23, 2007

Ms. HOOLEY introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title V of the Public Health Service Act to provide for enhanced comprehensive methamphetamine treatment services.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Enhanced Meth-
5 amphetamine Treatment Grants Assistance Act of 2007”.

6 **SEC. 2. GRANTS FOR WRAP-AROUND METHAMPHETAMINE**
7 **TREATMENT SERVICES.**

8 Subpart 1 of part B of title V of the Public Health
9 Service Act is amended—

1 (1) by redesignating section 514, as added by
2 section 3634 of Public Law 106–310 (114 Stat.
3 1236), as section 514B; and

4 (2) by inserting after section 514B, as redesign-
5 nated by paragraph (1), the following new section:

6 **“SEC. 514C. GRANTS FOR COMPREHENSIVE WRAP-AROUND**
7 **METHAMPHETAMINE TREATMENT SERVICES.**

8 “(a) AUTHORIZATION.—The Secretary, acting
9 through the Administrator of the Substance Abuse and
10 Mental Health Services Administration, shall provide
11 awards of grants to public, private, and nonprofit entities
12 and Indian tribes and tribal organizations to establish pro-
13 grams to provide for and coordinate the provision of wrap-
14 around services described in subsection (c) to meth-
15 amphetamine-affected individuals described in subsection
16 (b), in accordance with this section.

17 “(b) METHAMPHETAMINE-AFFECTED INDIVIDUAL
18 DESCRIBED.—For purposes of subsection (a), a meth-
19 amphetamine-affected individual is an individual who—

20 “(1)(A) resided in a residential inpatient treat-
21 ment facility for the treatment of methamphetamine
22 abuse or addiction; or

23 “(B) received treatment for methamphetamine
24 abuse or addiction from an intensive outpatient
25 treatment facility; and

1 “(2) after successful completion of such treat-
2 ment reenters the community of such individual.

3 “(c) WRAP-AROUND SERVICES DESCRIBED.—In the
4 case of a methamphetamine-affected individual, wrap-
5 around services described in this subsection are as follows:

6 “(1) Medical services.

7 “(2) Dental services.

8 “(3) Mental health services.

9 “(4) Child care services.

10 “(5) Job training services.

11 “(6) Housing assistance.

12 “(7) Training in parenting.

13 “(8) Prevention services for family members,
14 with respect to methamphetamine abuse or addic-
15 tion.

16 “(9) Transportation assistance services for pur-
17 poses of participation in the services listed in para-
18 graphs (1) through (8).

19 “(d) MINIMUM QUALIFICATIONS FOR RECEIPT OF
20 AWARD.—To be eligible to receive an award under sub-
21 section (a), an applicant shall provide assurances to the
22 satisfaction of the Secretary that—

23 “(1) the applicant has the capacity to carry out
24 a program described in such subsection;

1 “(2) the applicant, or any entity through which
2 the applicant will provide services described in sub-
3 section (c), meets all applicable State licensure or
4 certification requirements regarding the provision of
5 the services involved; and

6 “(3) the applicant has entered into agreements
7 with entities in the community involved through
8 which the applicant will provide such services.

9 “(e) PRIORITY FOR GRANTS DISTRIBUTIONS.—In
10 making grants under this section, the Secretary shall give
11 priority to applications for programs that serve commu-
12 nities with high or increasing rate of methamphetamine
13 abuse or addiction, as specified by the Secretary.

14 “(f) REPORTS.—For each year that an entity receives
15 a grant under subsection (a) for a program, such entity
16 shall submit to the Secretary a report on the results and
17 effectiveness of the program.

18 “(g) DEFINITIONS.—For purposes of this section:

19 “(1) RESIDENTIAL INPATIENT TREATMENT FA-
20 CILITY.—The term ‘residential inpatient treatment
21 facility’ means a facility that provides treatment for
22 substance abuse and in which health professionals
23 and clinicians provide a planned regimen of 24-hour
24 professionally-directed evaluation, care, and treat-

1 ment for such substance abuse in an inpatient set-
2 ting, including 24-hour observation and monitoring.

3 “(2) INTENSIVE OUTPATIENT TREATMENT FA-
4 CILITY.—The term ‘intensive outpatient treatment
5 facility’ means a facility that provides treatment for
6 substance abuse in which health professional and cli-
7 nicians provide regularly scheduled sessions. with re-
8 spect to such treatment, within a structured pro-
9 gram and that provides a minimum of 9 hours of
10 treatment during a week.

11 “(h) AUTHORIZATION OF APPROPRIATIONS.—There
12 is authorized to be appropriated to carry out this section,
13 \$40,000,000 for each of fiscal years 2009 through 2013.”.

14 **SEC. 3. FAMILY-BASED SUBSTANCE ABUSE TREATMENT**
15 **PROGRAMS.**

16 (a) EXTENSION AND EXPANSION OF RESIDENTIAL
17 TREATMENT PROGRAM FOR PREGNANT AND
18 POSTPARTUM WOMEN TO INCLUDE CAREGIVER PAR-
19 ENTS.—Section 508 of the Public Health Service Act (42
20 U.S.C. 290bb–1) is amended—

21 (1) in the heading, by striking “**PREGNANT**
22 **AND POSTPARTUM WOMEN**” and inserting
23 “**CAREGIVER PARENTS, INCLUDING PREGNANT**
24 **WOMEN**”;

25 (2) in subsection (a)—

1 (A) in the matter preceding paragraph

2 (1)—

3 (i) by inserting “and Indian tribes
4 and tribal organizations” after “private en-
5 tities”; and

6 (ii) by striking “pregnant and
7 postpartum women treatment for sub-
8 stance abuse” and inserting “caregiver
9 parents, including pregnant women, treat-
10 ment for substance abuse (including treat-
11 ment for addiction to methamphetamine)”;
12 and

13 (B) in each of paragraphs (1), (2), and
14 (3), by striking “women” and inserting “care-
15 giver parents” each place it appears;

16 (3) in subsection (b)(2), by striking “woman”
17 and inserting “caregiver parent”;

18 (4) in subsection (c)—

19 (A) in paragraph (1)—

20 (I) strike “eligible woman” and insert
21 “eligible caregiver parent”;

22 (ii) strike “with the women” and in-
23 sert “with the parent”; and

24 (iii) strike “to the woman” and insert
25 “to the parent”;

1 (B) in paragraph (2)(B), strike “woman”
2 and insert “caregiver parent”;

3 (5) in subsection (d), strike “woman” and in-
4 sert “caregiver parent” each place it appears and
5 strike “women” and insert “caregiver parents” each
6 place it appears;

7 (6) in subsection (h), strike “pregnant and
8 postpartum women” and insert “caregiver parents”;

9 (7) in subsection (j), strike “woman” and insert
10 “caregiver parent” each place it appears;

11 (8) in subsection (k)(2), strike “women” and
12 insert “caregiver parents”;

13 (9) by amending subsection (m) to read as fol-
14 lows:

15 “(m) USE OF FUNDS; PRIORITY FOR CERTAIN
16 AREAS SERVED.—

17 “(1) USE OF FUNDS.—A funding agreement for
18 an award under subsection (a) for an applicant is
19 that funds awarded under such subsection to such
20 applicant shall be used for programs according to
21 the following order of priority:

22 “(A) For a program that provides services
23 to caregiver parents who are pregnant and
24 postpartum women.

1 “(B) For a program that provides services
 2 to caregiver parents who are single parents and
 3 the sole caregivers with respect to their chil-
 4 dren.

5 “(C) For a program that provides services
 6 to any caregiver parents.

7 “(2) PRIORITY FOR CERTAIN AREAS SERVED.—
 8 In making awards under subsection (a), the Director
 9 shall give priority to any entity that agrees to use
 10 the award for a program serving an area that—

11 “(A) is a rural area;

12 “(B) an area determined by the Director
 13 to have a shortage of family-based substance
 14 abuse treatment options; or

15 “(C) is determined by the Director to have
 16 high rates of addiction to methamphetamine.”;

17 (10) in subsection (p), by striking “October 1,
 18 1994” and inserting “October 1, 2008”;

19 (11) in subsection (q)—

20 (A) by redesignating paragraphs (2), (3),
 21 (4), and (5) as paragraphs (3), (4), (5), and
 22 (6), respectively;

23 (B) by inserting after paragraph (1) the
 24 following new paragraph:

1 “(2) The term ‘caregiver parent’ means, with
 2 respect to a child, a parent or legal guardian with
 3 whom the child resides, and includes a pregnant
 4 woman.”; and

5 (C) by amending paragraph (3), as redes-
 6 ignated by subparagraph (A) of this paragraph,
 7 to read as follows:

8 “(3) The term ‘eligible caregiver parent’ means
 9 a caregiver parent who has been admitted to a pro-
 10 gram operated pursuant to subsection (a).”; and

11 (12) in subsection (r), by striking “such sums
 12 as may be necessary to fiscal years 2001 through
 13 2003” and inserting “\$70,000,000 for each of fiscal
 14 years 2009 through 2013”.

15 (b) PROGRAM TO REDUCE SUBSTANCE ABUSE
 16 AMONG NONVIOLENT OFFENDERS: FAMILY TREATMENT
 17 ALTERNATIVES TO INCARCERATION.—Title V of the Pub-
 18 lic Health Service Act (42 U.S.C. 290aa et seq.) is amend-
 19 ed by inserting after section 509 the following:

20 **“SEC. 510. PROGRAM TO REDUCE SUBSTANCE ABUSE**
 21 **AMONG NONVIOLENT OFFENDERS: FAMILY**
 22 **TREATMENT ALTERNATIVES TO INCARCER-**
 23 **ATION.**

24 “(a) IN GENERAL.—The Secretary, acting through
 25 the Administrator of the Substance Abuse and Mental

1 Health Services Administration, shall make awards of
2 grants, cooperative agreements, or contracts to public and
3 nonprofit private entities and Indian tribes and tribal or-
4 ganizations for the purpose of assisting local jails and de-
5 tention facilities in providing comprehensive, family-based
6 substance abuse treatment services (including treatment
7 for addiction to methamphetamine) to pregnant and par-
8 enting adults who are considered nonviolent offenders.

9 “(b) MINIMUM QUALIFICATIONS FOR NONPROFIT
10 PRIVATE ENTITIES.—An award may be made under sub-
11 section (a) to an applicant that is a nonprofit private enti-
12 ty only if the Secretary determines that—

13 “(1) the applicant has the capacity to provide
14 the services described subsection (a); and

15 “(2) the applicant meets all applicable State li-
16 cense and certification requirements regarding the
17 provision of substance abuse treatment services.

18 “(c) REQUIREMENTS APPLICABLE TO FAMILY DRUG
19 TREATMENT PROGRAM THAT IS AN ALTERNATIVE TO IN-
20 CARCERATION.—A grant under this section may be used
21 for a family drug treatment program that is an alternative
22 to incarceration only if the program complies with the fol-
23 lowing:

1 “(1) The program is a comprehensive, long-
2 term family treatment program focused on the treat-
3 ment of the parent and child.

4 “(2) The program and its providers meet all ap-
5 plicable State licensure and certification requirements
6 regarding the provision of substance abuse treat-
7 ment services.

8 “(3) Each parent offender who participates in
9 the program is sentenced to, or placed with, a long-
10 term family treatment program (which shall include
11 a residential component).

12 “(4) Each parent offender who participates in
13 the program serves a sentence with respect to the
14 underlying crime if that parent offender does not
15 successfully complete treatment with the residential
16 treatment provider.

17 “(5) The program has mandatory periodic drug
18 testing. The Secretary shall, by prescribing guide-
19 lines or regulations, specify standards for the timing
20 and manner of complying with such testing. The
21 standards shall ensure that—

22 “(A) each individual participating in the
23 program as an alternative to incarceration is
24 tested for every controlled substance that the
25 participant has been known to abuse, and for

1 any other controlled substance the Secretary
2 may require; and

3 “(B) the testing is accurate and prac-
4 ticable; and

5 “(C) the drug testing regime is a factor in
6 determinations of whether program participants
7 successfully complete treatment.

8 “(d) ALLOCATION OF AWARDS.—In making awards
9 under subsection (a), the Secretary shall give priority to
10 any entity that agrees to use the award for a program
11 serving an area that—

12 “(1) is a rural area, an area designated under
13 section 332 by the Administrator of the Health Re-
14 sources and Services Administration as a health pro-
15 fessional shortage area with a shortage of mental
16 health professionals, or an area determined by the
17 Secretary to have a shortage of family-based sub-
18 stance abuse treatment options; and

19 “(2) is determined by the Secretary to have
20 high rates of addiction to methamphetamine or other
21 drugs.

22 “(e) DEFINITIONS.—In this section the terms ‘family
23 drug treatment’, ‘family treatment’, and ‘comprehensive,
24 long-term family treatment’ describe programs that pro-
25 vide, or are able to provide referrals for, the following serv-

ices: Substance abuse treatment, children’s early interven-
 tion services, family counseling, legal services, medical
 care, mental health services, nursery and preschool, par-
 enting skills training, pediatric care, prenatal care, sexual
 abuse therapy, relapse prevention, transportation, and job
 or vocational training or general equivalency diploma
 (GED) classes.

“(f) AUTHORIZATION OF APPROPRIATIONS.—For the
 purpose of carrying out this section, there are authorized
 to be appropriated \$40,000,000 for each of fiscal years
 2009, 2010, and 2011, and \$50,000,000 for each of fiscal
 years 2012 and 2013.”.

SEC. 4. METHAMPHETAMINE TREATMENT PROGRAM
GRANTS FOR UNDERSERVED POPULATIONS.

Subpart 1 of part B of such title, as amended by sec-
 tion 2, is further amended by adding at the end the fol-
 lowing new section:

“SEC. 514D. METHAMPHETAMINE TREATMENT PROGRAM
GRANTS FOR UNDERSERVED POPULATIONS.

“(a) AUTHORIZATION.—The Secretary, acting
 through the Administrator of the Substance Abuse and
 Mental Health Services Administration, shall provide
 awards of grants to public, private, and nonprofit entities
 and Indian tribes and tribal organizations for the purpose
 of providing services in connection with the treatment of

1 methamphetamine use or addiction to underserved popu-
2 lations.

3 “(b) UNDERSERVED POPULATIONS DESCRIBED.—

4 For purposes of subsection (a), an underserved popu-
5 lation, with respect to services described in such sub-
6 section, is a population of individuals who are—

7 “(1) not eligible for such services under title
8 XVIII of the Social Security Act and are not eligible
9 for medical assistance for such services under title
10 XIX of such Act;

11 “(2) not receiving such services through a drug
12 court; and

13 “(3) not eligible for such services under a pro-
14 gram for pregnant or parenting women.

15 “(c) ELIGIBILITY.—To be eligible to receive an award
16 under subsection (a), an applicant shall provide assur-
17 ances to the satisfaction of the Secretary that the popu-
18 lation that will be furnished services funded by such award
19 will be an underserved population.

20 “(d) PRIORITY FOR GRANT DISTRIBUTIONS.—In
21 making grants under this section, the Secretary shall give
22 priority to applications for programs designed to serve in-
23 dividuals who proactively seek treatment for methamphet-
24 amine use or addiction and who are not required to do
25 so by court order or other form of law enforcement.

1 “(e) REPORTS.—For each year that an entity receives
2 a grant under subsection (a) for a program, such entity
3 shall submit to the Secretary a report on the results and
4 effectiveness of the program.

5 “(f) AUTHORIZATION FOR APPROPRIATIONS.—There
6 is authorized to be appropriated to carry out this section,
7 \$60,000,000 for each of the fiscal years 2009 through
8 2013.”.

9 **SEC. 5. SAMHSA STUDY ON METHAMPHETAMINE TREAT-**
10 **MENT METHODS.**

11 (a) STUDY.—The Secretary of Health and Human
12 Services, through the National Clearinghouse for Alcohol
13 and Drug Information, shall conduct a study to identify
14 methamphetamine use and addiction treatment meth-
15 odologies and to evaluate the efficacy of such methodolo-
16 gies.

17 (b) REPORT.—By not later than one year after the
18 date of the enactment of this Act, the Secretary of Health
19 and Human Services shall submit to Congress a report
20 on the results of the study under subsection (a).

○